



CITY OF NEW YORK
OFFICE OF THE COMPTROLLER
Scott M. Stringer

-GENERAL RELEASE-

DARLENE COOK, the claimant named in NYC Comptroller claim number 2015PI004002, being over the age of eighteen (18) years and residing at 450 CHESTER ST APT A BROOKLYN, NY 11212, as "RELEASOR", in consideration of the payment of \$9,000.00, receipt whereof is hereby acknowledged, having received independent legal advice in this matter or having voluntarily, knowingly, and willingly waived the opportunity to seek legal advice, hereby voluntarily, knowingly, and willingly releases and forever discharges the City of New York, and all past and present officials, officers, directors, managers, administrators, employees, agents, assignees, lessors, and representatives of the City of New York, and all other individually named defendants and/or entities represented and/or indemnified by the City of New York, collectively the "RELEASEES", from any and all liability, claims, or rights of action alleging a violation of civil rights and any and all claims, causes of action, suits, administrative proceedings, debts, dues, sums of money, accounts, reckonings, bonds, bills, specialties, covenants, contracts, controversies, transactions, occurrences, agreements, promises, damages, variances, trespasses, extents, judgments, executions, and demands known or unknown, at law, in equity, or by administrative regulations, which RELEASOR, his/her heirs, distributees, devisees, legatees, executors, administrators, successors and assignees had, now has or hereafter can, shall, or may have, either directly or through subrogees or other third persons, against the RELEASEES for, upon or by reason of any matter, cause or thing whatsoever that occurred through the date of this RELEASE. This RELEASE and settlement constitutes complete payment and satisfaction for all damages and injuries, including all claims for costs, expenses, attorney's fees and disbursements.

In further consideration of the payment set forth above, RELEASOR agrees to indemnify and save harmless RELEASEE for the amount of any and all liens, claims, litigation, actions, damages, judgments, costs, expenses, and/or any compensation whatsoever, presently known or unknown, whether for property damage, bodily injury, indemnification, contribution, or for any other claim of any nature whatsoever, by any person, arising out of the occurrence(s) and/or injury(ies) alleged in the aforementioned claim.

In further consideration of the payment set forth above, RELEASOR hereby waives, releases, and forever discharges RELEASEE from any and all claims, known or unknown, past and/or future conditional payments, arising out of the RELEASOR's Medicare eligibility for and receipt of Medicare benefits related to the claimed injury in this matter, and/or arising out of the provision of primary payment (or appropriate reimbursement), including causes of action pursuant to 42 U.S.C. Section 1395y(b)(3)(A) of the Medicare, Medicaid and SCHIP Extension Act of 2007.

It is understood and agreed that this RELEASE and payment made pursuant hereto shall not be construed as any admission of liability by the RELEASEE.

The words "RELEASOR" and "RELEASEE" include all releasors and all releasees under this RELEASE.

This RELEASE may not be changed orally.

THE UNDERSIGNED HAS READ THE FOREGOING RELEASE AND FULLY UNDERSTANDS IT.

IN WITNESS WHEREOF, I have executed this Release this on the 15 day of

December, 2015

[Signature], Claimant
(Signature)

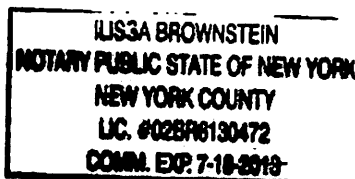
STATE OF NEW YORK)

COUNTY OF NY : SS.:

On December 15, 2015, before me personally came

Darlene Cook, to me known, and known to me to be the

individual described in, and who executed the foregoing GENERAL RELEASE, and duly acknowledged to me that (s)he executed the same.



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[Signature]
Notary Public